

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	2000	7-2000
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	HK	834	7/31/00
RESPONSE FORMALITY REVIEW			9/26/00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/11/01
2	✓	✓	6/27/02
3	✓	✓	6/27/02
4	✓	✓	6/27/02
5	✓	✓	6/27/02
6	✓	✓	6/27/02
7	✓	✓	6/27/02
8	✓	✓	6/27/02
9	✓	✓	6/27/02
10	✓	✓	6/27/02
11	✓	✓	6/27/02
12	✓	✓	6/27/02
13	✓	✓	6/27/02
14	✓	✓	6/27/02
15	✓	✓	6/27/02
16	✓	✓	6/27/02
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46	✓	✓	6/27/02
47	✓	✓	6/27/02
48	✓	✓	6/27/02
49	✓	✓	6/27/02
50	✓	✓	6/27/02

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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